

CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
401						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
451			501		551	
452			502		552	
453			503		553	
454			504		554	
455			505		555	
456			506		556	
457			507		557	
458			508		558	
459			509		559	
460			510		560	
461			511		561	
462			512		562	
463			513		563	
464			514		564	
465			515		565	
466			516		566	
467			517		567	
468			518		568	
469			519		569	
470			520		570	
471			521		571	
472			522		572	
473			523		573	
474			524		574	
475			525		575	
476			526		576	
477			527		577	
478			528		578	
479			529		579	
480			530		580	
481			531		581	
482			532		582	
483			533		583	
484			534		584	
485			535		585	
486			536		586	
487			537		587	
488			538		588	
489			539		589	
490			540		590	
491			541		591	
492			542		592	
493			543		593	
494			544		594	
495			545		595	
496			546		596	
497			547		597	
498			548		598	
499			549		599	
500			550		600	
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
601						
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TOTAL IND.	7					
TOTAL DEP.	313					
TOTAL CLAIMS	320					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

BEST AVAILABLE COPY

CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
401	✓						451	✓	501	✓	551	✓	601
402	=						452	✓	502		552		602
403	+						453		503		553		603
404	+						454		504		554		604
405	✓						455		505		555		605
406	=						456		506	+	556		606
407	✓						457		507		557		607
408							458		508	=	558		608
409							459		509	✓	559		609
410							460		510		560		610
411							461		511		561	+	611
412							462		512		562	+	612
413							463		513		563	=	613
414							464		514		564	✓	614
415							465		515		565	=	615
416							466		516		566	✓	616
417							467		517		567		617
418							468		518		568		618
419							469		519		569		619
420							470		520		570		620
421							471		521		571		621
422							472		522	=	572		622
423							473		523	✓	573		623
424	+						474		524		574		624
425							475		525		575		625
426	+						476		526		576		626
427	✓						477		527	✓	577		627
428							478		528	=	578		628
429							479	=	529	✓	579		629
430							480		530		580		630
431							481	+	531		581		631
432							482	✓	532		582		632
433							483	=	533		583		633
434							484	✓	534		584		634
435							485		535		585		635
436							486		536		586		636
437							487		537		587		637
438							488		538		588	=	638
439							489		539		589	+	639
440	+						490		540		590	=	640
441	✓						491		541		591	✓	641
442							492		542		592		642
443							493		543		593		643
444							494		544		594		644
445							495		545		595		645
446							496		546		596		646
447	✓						497		547		597		647
448							498		548		598		648
449							499		549		599		649
450							500		550		600		
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

SERIAL NO.

09/332, 244

FILING DATE

6/11/99

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	IND.	DEP.	IND.	DEP.	IND.	DEP.
51			101		151	
52			102		152	
53			103		153	
54			104		154	
55			105		155	
56			106		156	
57			107		157	
58			108		158	
59			109		159	
60			110		160	
61			111		161	
62			112			162
63			113		163	
64			114		164	
65			115		165	
66			116		166	
67			117			167
68			118		168	
69			119		169	
70			120		170	
71			121		171	
72			122		172	
73			123		173	
74			124		174	
75			125		175	
76			126		176	
77			127		177	
78			128		178	
79			129		179	
80			130		180	
81			131		181	
82			132		182	
83			133		183	
84			134		184	
85			135		185	
86			136		186	
87			137		187	
88			138		188	
89			139		189	
90			140		190	
91			141		191	
92			142		192	
93			143		193	
94			144		194	
95			145		195	
96			146		196	
97			147		197	
98			148		198	
99			149		199	
100			150		200	
TOTAL INC.						
TOTAL DEP.						
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
201						251		301		351	
202						252		302		352	
203						253		303		353	
204						254		304		354	
205						255		305		355	
206						256		306		356	
207						257		307		357	
208						258		308		358	
209						259		309		359	
210						260		310		360	
211						261		311		361	
212						262		312		362	
213						263		313		363	
214						264		314		364	
215						265		315		365	
216						266		316		366	
217						267		317		367	
218						268		318		368	
219						269		319		369	
220						270		320		370	
221						271		321		371	
222						272		322		372	
223						273		323		373	
224						274		324		374	
225						275		325		375	
226						276		326		376	
227						277		327		377	
228						278		328		378	
229						279		329		379	
230						280		330		380	
231						281		331		381	
232						282		332		382	
233						283		333		383	
234						284		334		384	
235						285		335		385	
236						286		336		386	
237						287		337		387	
238						288		338		388	
239						289		339		389	
240						290		340		390	
241						291		341		391	
242						292		342		392	
243						293		343		393	
244						294		344		394	
245						295		345		395	
246						296		346		396	
247						297		347		397	
248						298		348		398	
249						299		349		399	
250						300		350		400	
TOTAL IND.						TOTAL INC.	8				
TOTAL DEP.						TOTAL DEP.	321				
TOTAL CLAIMS						TOTAL CLAIMS	329				